

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 135

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Stivers For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. J. David Karam</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		25		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		25		2015									
Mailing Address 2380 Onandaga Drive		<b>Transaction ID : A6D8B6C7758894A2185F</b>											
City Columbus	State OH	Zip Code 43221-3618	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1350.00</td> </tr> </table>						1350.00				
					1350.00								
FEC ID number of contributing federal political committee. C													
Name of Employer Cedar Enterprise	Occupation Executive												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1350.00</td> </tr> </table>								1350.00				
					1350.00								
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. John DeTore</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		12		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		12		2015									
Mailing Address 4 Realton Road		<b>Transaction ID : A217DA3E2A9504549B05</b>											
City West Roxbury	State MA	Zip Code 02132-1006	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>						2000.00				
					2000.00								
FEC ID number of contributing federal political committee. C													
Name of Employer Rubin and Rudman	Occupation Attorney												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>								2000.00				
					2000.00								
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Pamela Collins Egan</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>22</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	06		22		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
06		22		2015									
Mailing Address 7 Country Way		<b>Transaction ID : AD4EBC55009A24ED08F6</b>											
City Hopkinton	State MA	Zip Code 01748-2174	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2700.00</td> </tr> </table>						2700.00				
					2700.00								
FEC ID number of contributing federal political committee. C													
Name of Employer Homemaker	Occupation Homemaker												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2700.00</td> </tr> </table>								2700.00				
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<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>6050.00</td> </tr> </table>							6050.00				
					6050.00								
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											